SCHEDULE B (FEC Form 3X)	Lleo conorato cohodula/a	.\	FOR LINE NUMBER: PAGE 14 OF 16		
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(oricon oriny	•	<b>▽</b> 23	
	Detailed Summary Page	21b	22 X 23 28b	24 25 26 28c 29 30b	
Any information copied from such Reports and Sta	atements may not be sold or u				
or for commercial purposes, other than using the					
NAME OF COMMITTEE (In Full)					
│					
Full Name (Leat First Middle Initial)					
Full Name (Last, First, Middle Initial)  A. Romney for President			Date of Disbursement		
1. Normey for Fresident			10 17 2012		
Mailing Address 585 Commercial Street					
City Boston	State Zip Code MA 02109		Transaction ID : S	SB23.5755	
Purpose of Disbursement	WA 02109				
PAC In-Kind Expenditure: Airfare		002	Amount of Each Dis	sbursement this Period	
Candidate Name		Category/	200.00		
		Type		633.20	
Office Sought: House Disbursement For: 2012			[MEMO ITEM]		
Senate  ✓ President	Primary				
State: District: 00	onior (opcony)				
Full Name (Last, First, Middle Initial)					
B. Romney for President			Date of Disburseme	ent	
			M = M / D = D / Y = Y = Y		
Mailing Address 585 Commercial Street			10 17	2012	
City	State Zip Code				
Boston	MA 02109		Transaction ID : S	SB23.5756	
Purpose of Disbursement PAC In-Kind Expenditure: Airfare					
Candidate Name			Amount of Each Disbursement this Period		
Candidate Name		Category/ Type		633.20	
Office Sought: House Disbut	rsement For: 2012	Туре	[MEMO ITEM]	, , , , , , , , , , , , , , , , , , , ,	
Senate	Primary Seneral				
President	Other (specify) ▼				
State: District: 00					
Full Name (Last, First, Middle Initial)			Data of Diahuraama	ant.	
C. Romney for President			Date of Disburseme		
Mailing Address 585 Commercial Street			10 17	2012	
City	State Zip Code		Transaction ID : S	SB23.5757	
Boston Purpose of Disbursement	MA 02109				
PAC In-Kind Expenditure: Airfare		002	Amount of Each Dis	sbursement this Period	
Candidate Name Category/					
		Type		633.20	
	rsement For: 2012		[MEMO ITEM]		
Senate  ✓ President	Primary				
State: District: 00	Other (specify)				
SUBTOTAL of Disbursements This Page (optional	al)			0.00	
TOTAL This Period (last page this line number o	nly)				